## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

**CLAIMS AS FILED - PART I** 

Application or Docket Number

503023-B-01-US (Krishnakumar)

			(Column 1)		(Column 2)		TYPE		OR	OR SMALL ENTITY		
TOTAL CLAIMS			23			•		RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	23 minus 20=		* 3			X\$ 9=		OR	X\$18=	M
INI	DEPENDENT C	CLAIMS	minus 3 =*		*	2_		X43=		OR	X86=	122
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* 1	the difference	e in column 1 is	less than ze	ss than zero, enter "0" in column 2			ı	TOTAL		OR	TOTAL	996
CLAIMS AS AMENDED - PART II									<del></del>	4	OTHER	
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL	
MENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT A</b>	Total	* .	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF MI	Minus	***	CL AINA	=		X43=		OR	X86=	
<u> </u>	FIRST PRESE	ENTATION OF MI	JUIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
					•	•	L	TOTAL DDIT. FEE		OB	TOTAL ADDIT. FEE	
				\	• '	ADDII. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F		-			
					•		L	+145=	-	OR	+290=	
		·		•				DDIT. FEE	<u> </u>	OR ,	TOTAL ADDIT: FEE	
	-	(Column 1)		(Column		(Column 3)			•			
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT	,	HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	┢	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<del></del>		OR	700-	
* 15	the other in colum	nn 1 is less than the	, mensin anti-		· · · · · ·	'0	L	+145=		OR	+290=	
**	the "Highest Nur the "Highest Nur	nn 1 is less man ind nber Previously Pai nber Previously Paid ber Previously Paid	d For" IN THIS id For" IN THIS	SPACE is le	ess than	20, enter "20." 3. enter "3."	70	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE mn 1.	